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Preparations for the Second World Assembly on Ageing: consideration of the draft outcome document(s) of the World Assembly

Towards the Second World Assembly on Ageing

Report of the Secretary-General

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I. Introduction

1. In its resolution 54/262 of 25 May 2000, the General Assembly decided to convene the Second World Assembly on Ageing in 2002, on the occasion of the twentieth anniversary of the first World Assembly on Ageing, which was held in Vienna in 1982. The Government of Spain will host the Second World Assembly on Ageing in Madrid from 8 to 12 April 2002. The Assembly will be devoted to the overall review of the outcome of the first World Assembly and to the adoption of a revised plan of action and a long-term strategy on ageing in the context of a society for all ages, the theme of the 1999 International Year of Older Persons. The General Assembly also requested the Secretary-General to consult Governments, intergovernmental and non-governmental organizations (NGOs) on their views and experiences on progress in and obstacles to the implementation of the Plan of Action and priority issues to be addressed.

2. Also in resolution 54/262, the General Assembly decided that the Commission for Social Development shall serve as the preparatory committee for the Second World Assembly on Ageing. To this end, the Commission for Social Development, in its decision 38/100, requested the Secretary-General to establish an in-session open-ended working group of the thirty-ninth session of the Commission for Social Development, devoted to the revision of the International Plan of Action on Ageing, adopted at the first World Assembly, and the elaboration of a long-term strategy for its presentation to the Second World Assembly.

3. The present report has been organized in two main sections for consideration by the Preparatory Committee for the Second World Assembly on Ageing. The first section is for background and informational purposes and has three elements: a review of the ongoing preparations for the Second World Assembly, centred around a substantive debate on the revision of the International Plan of Action on Ageing; a proposed format for the Assembly; and an overall review of the outcome of the first World Assembly based on surveys sent to principal stakeholders to solicit their views on progress in the implementation of the Plan of Action.

4. The second section of the present report (see annex) includes an extended draft framework of the revised International Plan of Action on Ageing. The long-term strategy on ageing, which was called for by the General Assembly in resolution 54/24 of 10 November 1999, is presented in the form of a preamble to the Plan of Action and is entitled "Strategy for a society for all ages". This is in accordance with General Assembly resolutions 54/24 and 54/262 and with decision 38/100 of the Commission for Social Development, in which the Commission requested an integrated submission of the strategy and the revised Plan of Action. The subsequent section, by way of introduction to the Plan, describes the conceptual background and underlying foundations of the proposed structure of the revised Plan of Action.

5. The main body of the revised Plan of Action identifies three priority directions for policy action: (a) sustaining development in an ageing world; (b) advancing health and well-being into old age; and (c) ensuring enabling and supportive environments for all ages. Under each of the three priority directions, a number of priority issues are elaborated for further work by the Secretariat, including the drafting of objectives and recommendations before the next session of the Preparatory Committee. A section entitled "Preparing to meet the challenges of ageing" is a first draft of the final chapter of the proposed Plan of Action, focusing on major partners, research, training and education, international cooperation and implementation of the Plan.

6. The Preparatory Committee may wish to proceed in discussing the text of the extended draft framework of the revised International Plan of Action on Ageing, bearing in mind that the main body of the revised Plan (i.e., chap. III) is earmarked for further elaboration.

7. A separate document on proposed rules of procedure for the Second World Assembly on Ageing is also before the Committee.

II. Preparations for the Second World Assembly on Ageing

8. When the Second World Assembly on Ageing convenes in 2002, the ageing of the global population will have captured the world's attention as one of the defining characteristics and challenges, of the twenty-first century. Twenty years ago, ageing in developed countries was much in evidence in the substantive discussions at the first World Assembly on Ageing in Vienna. That is still an issue of major importance, but by 2002 the majority of older people will be living in

developing countries, and the institutional framework and capacity of many Governments both to sustain development of their ageing societies and ensure well-being into old age will be facing greater challenges. The world community of Member States, non-governmental and intergovernmental organizations and the United Nations system will take up these issues and many others when it gathers in Madrid in April 2002. Preparations are now under way.

9. The revision of the International Plan of Action on Ageing is at the centre of the substantive debate leading towards the Second World Assembly. The United Nations programme on ageing has begun to facilitate input from various sectors for inclusion into the preparatory process. In its resolution 54/262, the General Assembly invited the Secretary-General to establish a technical committee to assist him in the formulation of proposals during preparations for the Second World Assembly. The Technical Committee for the Second World Assembly on Ageing is composed of experts who, serving in their personal capacity, come from a cross-section of professional and geographic backgrounds to ensure a balanced global perspective. The role of the Technical Committee is to provide advice to the United Nations Secretariat on technical issues related to the preparatory process, in particular regarding the content of the revised Plan of Action and the proposed long-term strategy.

10. The first meeting of the Technical Committee was held in Frankfurt from 13 to 16 June 2000, with the financial support of the Government of Germany. Committee experts were asked to give their opinions on such issues as how to ensure that ageing in developing countries is fully integrated into the revised Plan, its format and the issues it is to address. A report of the meeting can be accessed on the ageing web site (www.un.org/esa/socdev/ageing).

11. The second meeting of the Technical Committee was held in the Dominican Republic from 24 to 27 October 2000, with the financial support of the Government of Spain. Committee experts discussed and advised the Secretariat on the main part of the Plan of Action. A report of that meeting can also be accessed on the ageing web site. The third meeting of the Technical Committee will be held in Austria in 2001.

12. Parallel efforts to engage the technical as well as the political process for 2002 are ongoing from all sectors, including NGOs. An international conference on rural ageing was held in West Virginia in June 2000. The Center on Ageing of West Virginia University organized the conference in collaboration with the United Nations programme on ageing, the World Health Organization and the International Association of Gerontology. After obtaining broad feedback, the organizers of the conference are planning to produce a policy document on rural ageing to contribute to the ongoing substantive debate for the Second World Assembly.

13. The Economic Commission for Africa hosted an expert group meeting on sustainable social structures in a society for all ages in Addis Ababa in May 2000. The United Nations programme on ageing collaborated with HelpAge International, an NGO, in organizing the meeting, which was aimed at identifying the challenges of ageing vis-à-vis family and community. The Department for International Development of the Government of the United Kingdom of Great Britain and Northern Ireland gave financial support to the meeting. A report of the four-day meeting can be accessed on the ageing web site.

14. A panel on ageing and development was held at the United Nations on 4 October 2000 to explore adequate responses to the consequences of the ageing of the world's population and ways to enhance opportunities for older persons to be involved in the development process. The United Nations Population Fund (UNFPA) gave financial support for the meeting and collaborated on its organization with the United Nations programme on ageing. In addition, a panel on ageing and the world of work was held at the United Nations on 6 October 2000. The meeting was co-sponsored by the United Nations programme on ageing and the International Labour Organization (ILO), which also gave financial support to the meeting. Another panel, entitled "Population agequake: the impact on social and economic policy", took place at the United Nations in October 2000, co-sponsored by the NGO Committee on Ageing (New York), the NGO Committee on the Status of Women, the Association of Former International Civil Servants (AFICS) and the Department of Economic and Social Affairs of the United Nations, moderated by the international office of the American Association of Retired Persons (AARP) in New York.

15. The World Assembly on Ageing is on the agenda of numerous international and regional meetings. The

International Day of Older Persons in 2000, organized by the NGO Committee on Ageing, in collaboration with the Department of Public Information and the Department of Economic and Social Affairs of the United Nations, was marked by an all-day event at Headquarters under the theme, "Towards a society for all ages: continuing the mission of the International Year of Older Persons". The International Federation of Associations of the Elderly (FIAPA) addressed ageing issues confronting its regional members at a celebration of its twentieth anniversary in Brussels in October 2000, with members from Africa, Eastern Europe and Latin America and the Caribbean.

16. The International Federation on Ageing met in Mar del Plata, Argentina, in September 2000 for its fifth Global Conference on Ageing, which focused on a wide array of challenges in the new millennium. The Pan American Health Organization (PAHO) held a forum in El Salvador on "Ageing, health and well-being in the Central American region" in November 2000, focusing on the many aspects of health and ageing, including social and cultural perspectives. The International Association of Gerontology will hold a meeting in Salsomaggiore, Italy, in December 2000, in collaboration with the United Nations programme on ageing, to discuss the final elements of the research agenda on ageing for the twenty-first century. This expert meeting will provide an opportunity to significantly refine the priorities identified thus far in the research agenda and to finalize the document which hopes to advance both scope and implementation of global policy research in ageing.

III. Proposed format of the Second World Assembly on Ageing

17. Concerning the format of the upcoming Second World Assembly on Ageing, it is proposed that the General Assembly could organize its work through the establishment of a plenary and two main committees, to be composed of representatives of Member States: committee I and committee II. The plenary would hear statements from Member States and, time permitting, representatives of principal stakeholders, such as NGOs, academia, intergovernmental organizations, professional associations and the private sector. Committee I would be responsible for the finalization of the revised International Plan of Action on Ageing to be adopted in the plenary.

18. Committee II would receive and discuss summary contributions from an NGO forum and other contributory events and would summarize the results of the contributions as a report. This committee could provide the forum for dialogue among interested parties and Member States may like to consider how the report of committee II can be reflected in the final deliberations of the General Assembly.

19. The host Government will organize a contributory events segment. It could consist of cross-sectoral meetings and panels, symposia, exhibitions, festivals and award ceremonies. Preliminary indications of interest have been received from NGOs, intergovernmental organizations and professional associations.

20. The detailed explanation of the organization of work of the Assembly can be found in the accompanying documents of the Preparatory Committee.

21. The scope and content of the above-proposed segments are subject to availability of additional resources from the host Government and other contributors. It should be noted, however, that many events, particularly those proposed within the contributory events segment, might be sponsored through extrabudgetary contributions.

IV. Review of the outcome of the first World Assembly on Ageing

Introduction

22. In its resolution 54/262, the General Assembly requested the Secretary-General to consult Governments, intergovernmental organizations and NGOs to elicit their views on the progress in and obstacles to the implementation of the International Plan of Action on Ageing, as well as on priority issues to be addressed in a revised International Plan of Action and the proposed long-term strategy. The results of this consultation are intended to assist the Commission for Social Development in the preparatory process leading up to the Second World Assembly on Ageing in Madrid in April 2002.

23. The following review is based on replies to questionnaires sent to Member States, intergovernmental organizations, the United Nations

system and international NGOs. In all, 61 responses were received from Member States, 6 from United Nations entities, 14 from international NGOs and 2 from intergovernmental organizations.[1]

24. The country responses included in the analysis were geographically distributed as follows:

Region	*Count*	*Percentage*	*Response rate (%)*
Africa	10	16	19
Americas	11	18	31
Asia	18	30	39
Europe	21	34	49
Oceania	1	2	6
Total	**61**	**100**	**32**

Among the 61 country respondents, 16 (26 per cent) were developed countries, 34 (56 per cent) were developing countries, and 11 (18 per cent) were countries with economies in transition.

25. The review questionnaires were designed to assess the progress and identify obstacles since the first World Assembly on Ageing in Vienna in 1982. Respondents were also asked for their views on future actions that should be addressed at the upcoming Second World Assembly.

Analysis of responses to questionnaires

Progress since the first World Assembly on Ageing

26. Progress made since the first World Assembly on Ageing is uneven and varies from country to country, reflecting differences in available resources, priorities and other factors. Respondents identified several areas of progress, including the development of national infrastructure on ageing, such as national plans and programmes and coordinating mechanisms on ageing, the improvement of health and housing provision and income security for older persons, as well as the enhancement of participation of older persons in society.

27. Of the 61 reporting countries, 34 (56 per cent) reported that they have national plans/programmes of action to address age-related issues. Of the 35 countries where plans/programmes exist, 30 countries have integrated the recommendations of the International Plan of Action on Ageing into their plans. Half of the 26 (43 per cent) countries without national plans on ageing have integrated policy issues on ageing into their national development plans while the rest have included age-related issues into the programmes of particular governmental bodies, such as Ministries of Labour and Social Affairs.

28. In 1991, the General Assembly, in resolution 46/91 of 16 December 1991, adopted the United Nations Principles for Older Persons. Governments were encouraged to incorporate the Principles into their national programmes. In the questionnaire, countries were asked to rank the importance that the Principles are given within their national plans of action. Of the 44 responding countries, 19 countries gave a ranking of 5 (most important); 13 countries gave a ranking of 4; and 8 countries gave a ranking of 3. It appears that the Principles play a significant role in the development of national plans.

29. Regarding policies specifically addressing issues related to older women, of the 58 countries that responded, 19 countries have instituted policies for older women while the other 39 countries have not. Countries with policies on older women have focused on the following areas, in order of priority: economic security; health and family caregiving; advocacy; and human rights. In addition, gender equality and social integration, as well as promotion of active role of women in the community, were addressed in such policies.

30. Most developed countries have well established national coordinating mechanisms on ageing responsible for the progress in implementing the International Plan of Action on Ageing. Through such mechanisms, national laws, policies and programmes related to the situation of older persons were enacted and formal and informal care provision, pension reform and expanded community development projects have been strengthened. Through legislation, several countries have improved health and medical care insurance. Government appointed bodies have promoted guidelines and strategies for the overall well-being of older persons and enhanced legal protection of older persons. There have been instances where major policy reforms gave municipalities more responsibility for the care of the elderly.

31. While the infrastructure on ageing in developing countries and countries with economies in transition may not be as well established as in developed countries, 24 of the 45 countries in this group included in the analysis indicated the presence of national programmes or plans of action on ageing, albeit at different stages of development.

32. The creation of graduate studies in gerontology in some universities, as well as research on ageing, including the publication of reports on the situation of older persons, were reported by Member States. Specialized training in geriatrics and gerontology is increasingly offered in certain countries while the designation of a national day for older persons and the celebration of the International Year of Older Persons are important initial steps towards growing a awareness of the situation of older persons in other countries.

33. Countries reported improved quality of health care provision to older persons. Developing countries and countries with economies in transition reported on improving health care provision and developing non-institutional care and home-care programmes. Several developed countries had set up universal health systems, provided improved informal and home care and trained health professionals to assess the health care needs of older persons. Family and informal care arrangements were reported to have played a significant role in enabling older persons to remain in the community and avoid premature admission to residential care facilities.

34. Several countries have provided housing to older persons, especially the homeless, set up long-term stay residential facilities and improved housing conditions, including home care. Other countries enhanced accessibility and mobility of older persons, for example, by providing public transportation at discounted cost.

35. The challenge of educating the general public about ageing becomes more important as populations age. To raise awareness on ageing, Governments have incorporated information on ageing in educational programmes and have enlisted mass media and NGOs to launch campaigns to promote understanding of ageing issues. Through advocacy measures, countries have succeeded in changing attitudes towards ageing, promoting positive images of older persons and recognizing specific issues and problems of older persons. In addition, countries offered continuing education and social activities that will stimulate learning by older persons.

36. Income security of older persons is provided largely through pensions and social security schemes. Responding countries reported the presence of various pension plans — universal, limited or voluntary. Some developing countries have implemented old age pension schemes or have reformed national pension plans. In some countries, social security provisions are implemented at the municipal level. Governments have instituted reforms, including the provision of additional allowances, in order to provide better pension and social security plans to address the changing income needs of older persons, for example, through indexation of pension or lump sum compensation payments.

37. Increasingly, as older persons enjoy a more healthy life, many choose to work and provide for their own income security. Thus, Governments have promoted policies to support employment for older persons, including job training, job placement, reform of retirement policies and protection from age discrimination in employment.

38. NGOs, United Nations entities and intergovernmental organizations were also asked to report on their respective achievements on ageing issues. Responding NGOs have made significant contributions in advocacy, capacity-building and development assistance. According to responses from United Nations entities and intergovernmental organizations, ageing had been mainstreamed in major international policy documents, as well as in several other areas, particularly in publications, reports and research as well as in technical cooperation and training.

39. Responding countries were asked to rank the priorities given to the four dimensions of the conceptual framework of a society for all ages within national policy action on ageing, namely: the situation of older persons; individual lifelong development; multigenerational relationships; and the interrelationship between population ageing and development. The situation of older persons was ranked as the highest priority by 34 reporting countries. The dimension on individual lifelong development, along with multigenerational development and the interrelationship between population ageing and development, were ranked at the highest priority by

only 13 countries. Clearly, these three items in the framework are perceived to be of lesser importance for national activities on ageing compared to the situation of older persons. NGOs and United Nations entities also gave the highest priority to the situation of older persons and gave lower priority to the demographic ageing and development dimension.

Agents of change

40. Member States were consulted about which sector of society had the general responsibility for ageing issues. According to half of the participating countries, Governments bore the major responsibility for addressing the issues related to ageing. This was followed by families and then by individuals as the major sectors responsible for addressing ageing issues, while the religious and private sectors ranked the lowest. Other entities actively involved with ageing issues are the trade unions and committees on retired workers. Local Governments, such as municipalities, are also becoming more involved in old age policy programmes.

41. Increasingly, older persons are actively participating and contributing to society and changing the perception that they are simply dependants. For example, the care of orphans of HIV/AIDS victims in most African countries has fallen chiefly on older persons. About two thirds of responding countries indicated that older persons have been most active in cultural settings, including art, music and literature, and as caregivers and volunteers for charitable, philanthropic or other organizations.

42. In a little less than half of the responding countries, older persons serve as advisers in community or national development plans and as trainers and educators for youth. In most agricultural countries, older persons are active in agricultural work and are relied on to make important decisions. Older persons are also involved, to a lesser degree, in the areas of small-scale enterprises, in flexible and formal employment arrangements and as business and career mentors. In the above capacities, older people provide excellent role models for successful ageing.

43. Respondents were also asked to identify the entities that help advance the role of older people in society. Non-governmental and voluntary organizations were reported to play a leading role in this regard. They were followed by governmental entities and then by religious groups. Other important entities identified included academic institutions, professional organizations, women's advocacy groups and labour unions. Corporations were also reported to play a limited role.

Challenges and obstacles

44. The International Plan of Action on Ageing, adopted at the first World Conference in Vienna in 1982, contains recommendations for action in the following seven areas of concern to older persons: health and nutrition; protection of elderly consumers; housing and environment; family; social welfare; income security and employment; and education. The respondents were asked to identify which of the seven areas in the International Plan proved most difficult to address. About half of the reporting countries indicated difficulty in the areas of housing and the living environment of older persons, income security and employment and protection of elderly consumers. The area least mentioned was family. Health and nutrition, social welfare and education were areas cited as the areas of difficulty by about a third of the responding countries. There was no significant difference in the responses of developing and developed countries. While income and employment was a common area of difficulty for most respondents, housing was the problem most often cited by developing countries. Health and nutrition as well as protection of elderly consumers were specifically challenging to reporting countries with economies in transition. Consumer protection of older persons was the most difficult area to address according to participating countries from developed areas.

45. Thirty-five countries, 57 per cent of those responding, reported lack of funding as the reason for their difficulties in implementing the recommendations of the Plan of Action. Economic difficulties in developing countries and countries with economies in transition have constrained the allocation of funds as called for in the Plan of Action. Countries in armed conflict and those hit by natural disasters reported having limited resources to address ageing issues. In addition, age-related concerns get low priority in countries where the proportion of the ageing population is relatively small.

46. Most developing countries in the study indicated that the shortage of government staff is another common problem. In addition, some countries do not

have a well-defined body to manage ageing issues. In certain cases, however, the assigned body is unwilling to assume responsibility for the care of older persons. The lack of coordination between agencies at different levels in the government hierarchy, which may have overlapping responsibilities, can result in conflicting interests and priorities. In addition to the lack of expertise in policy-making, some decision makers have insufficient knowledge about the Plan. Furthermore, it was perceived that the Plan lacks concrete and refined recommendations and carries no convincing appeal to other stakeholders such as NGOs, the private sector and the media.

47. United Nations entities responding to the questionnaire would like to see greater commitment by countries on ageing issues and greater awareness of the cost-effectiveness of public programmes. In addition, they identified the need for more involvement of older persons in policies, programmes and projects.

Priorities for future action

48. The format of the current International Plan of Action on Ageing was found to be helpful by 44 countries, or 72 per cent of the reporting countries, although some countries thought that the Plan could be improved. Eleven countries (18 per cent) wanted to change the format of the Plan, but had different ideas on how the new format should be designed. It was felt that there were too many recommendations in the Plan, and that those should be replaced by commitments. Some developed countries sought a redesign of the Plan. One of the proposals was to include well-defined time-bound objectives in an updated plan.

49. Respondents suggested that the International Plan of Action on Ageing should be updated to include emerging issues in order to keep the Plan more attuned to demographic, socio-economic and technological changes. The socio-economic implications of migration of younger workers for instance need to be further examined and addressed. Developments in technology and the implications for communication, education, employment, health and longevity of older persons should be incorporated in the Plan.

50. Among the recommended areas in the current Plan, 31 of the responding countries (51 per cent) said that the issue of promoting income security and employment needed to be updated, and 30 (49 per cent) respondents indicated that recommendations on housing and the living environment of older persons could be improved. Respondents from developing countries and countries with economies in transition ranked income and employment as a high priority area. For developing country respondents, however, health and nutrition was another priority issue needing improvement, while for countries with economies in transition, the social welfare of older persons was another important area. Developed country respondents gave priority to housing and living conditions. Transportation of older persons and related issues of accessibility and mobility in society remain an important concern for some countries.

51. In addition, there was a wide range of suggested issues that could be further elaborated in the revised Plan. Policy interventions on issues that will promote active participation, value the contribution and promote the political representation of older persons in society were suggested. Volunteer work, self-help initiatives and participation of older persons in social organizations could offer opportunities to strengthen solidarity between generations. The impact on older persons of migration, particularly of the younger generation, is a serious concern in most developing countries.

52. Other suggestions dealt with providing a more supportive environment, one promoting social inclusion, for older persons. It was proposed that protecting the rights of older persons, especially from abuse and violence, should be ensured. Furthermore, the concerns of rural and indigenous populations and older immigrants from different backgrounds should be given particular attention. Other proposals relate to achieving better life in old age through improved health. Life-course planning should be promoted to facilitate preparations for a long life, including measures to improve health, economic security and life satisfaction in old age.

53. NGOs and intergovernmental organizations also saw the need to change the format of the International Plan of Action on Ageing. They recommended: broadening the areas of concern, reflecting developments in demographic patterns, technology, biomedical research; linking the Plan of Action to global commitments, such as the World Summit for Social Development, the Fourth World Conference on Women and their follow-up initiatives; and including specific concerns of developing countries, possibly

based on a regional assessment of progress and difficulties.

54. Of the reporting countries, 58 out of 61 recognized international cooperation as a necessary dimension in achieving the goals of the Plan of Action; 39 preferred multilateral partnerships; 4 opted for bilateral relations and 12 countries chose both. Among possible multilateral partners, 41 reporting countries preferred intergovernmental organizations, such as the United Nations family of organizations and regional organizations; 39 countries would like relations with international NGOs; and 26 countries preferred private foundations.

55. Member States were asked to identify priorities for future international cooperation. According to 49 country responses, the two priority areas were formulation, monitoring and evaluation of policies and programmes and research to support policy and programme development. The next priority was the training of health and social professionals followed by efforts to establish income-generating projects. Data collection and processing appeared to be a lower priority issue for the responding countries. Other suggested topics for international cooperation included: scientific research; education; information dissemination and the sharing of best practices; funding to improve existing programmes; and research and data collection coordinated by international organizations such as the United Nations and the Organisation for Economic Cooperation and Development (OECD).

56. For NGOs and United Nations entities, the need for international cooperation in implementing, monitoring and evaluating programmes on ageing was the priority. As in the country responses, these entities also identified the need for international cooperation in the training of health and social professionals, as well as for research to support policy and programme development.

57. International NGOs and United Nations entities were also asked to identify priorities for future action in developing countries. Policies on health care, protection of human rights of older persons and social security systems were seen as future priority areas. Issues of particular concern to older women, including migration, formal/informal caregiving and public health, the impact of chronic non-communicable disorders on older persons, and the impact of the HIV epidemic, were also identified as important priorities for national and international action in developing countries.

Summary

58. Findings suggest that important progress has been made on ageing since the first World Assembly on Ageing in 1982. Countries have incorporated ageing issues in their plans, policies and programmes, albeit to varying degrees. The United Nations Principles for Older Persons is increasingly recognized as an important guide in the development of national legislation and plans. However, progress in the implementation of the International Plan of Action on Ageing has been uneven and insufficient, particularly in some developing countries and countries with economies in transition.

59. Achievements include improved health care and insurance, housing, retirement benefits, income security, accessibility to facilities and mobility for older persons. Provision of services in developed countries are well established. Although developing countries lag behind, many developing countries have increasingly introduced health and social services for older persons, reflecting a growing awareness of issues and concerns for older persons. These achievements and ongoing efforts, which are reflected in national legislation, were promoted during the observance of the International Year of Older Persons in 1999. Older persons are increasingly recognized as contributors to society, rather than simply as dependants, and as agents of change.

60. NGOs, along with government entities at national and local levels, have promoted advocacy for ageing issues, although corporations and the private sector in general are yet to be perceived as playing a significant role.

61. The major challenges to the implementation of the International Plan of Action on Ageing include lack of funding and the shortage or lack of expertise of government staff, particularly in developing countries. In addition, economic difficulties have strained the ability of several countries with economies in transition to provide full services to the older population. Other areas identified as being difficult to address are housing, income security, employment and social welfare.

62. Although the current International Plan of Action on Ageing has proven useful, responding nations and entities recommended ideas to improve its coverage and to incorporate the demographic, economic and technological developments since 1982, including implications of migration of younger workers. The concerns of developing countries, such as protection from violence, neglect and abuse and the welfare of older people in rural areas, were also raised. Other respondents underscored the need to establish well-defined and time-bound objectives in the Plan.

63. Finally, the responding countries, NGOs and United Nations entities identified areas for future international cooperation and expressed the need to exchange ideas on best practices. These include policy and programme development, research, training of health and social professionals, programmes for income-generation, health care and human rights issues. The most important priority for participating developing countries was research to support policy and programme development, followed by training of health and social professionals.

Notes

[1] Participation in the review of the outcome of the first World Assembly on Ageing:

A. Member States

Albania
Algeria
Australia
Austria
Azerbaijan
Bahrain
Barbados
Canada
Cambodia
Cameroon
China
Croatia
Cuba
Cyprus
Czech Republic
Dominican Republic
Ecuador
El Salvador
Estonia
Ethiopia
Finland
Germany
Ghana
Guyana
Italy
Iraq
Japan
Kazakhstan
Kenya
Latvia
Lao People's Democratic Republic
Luxembourg
Madagascar
Malta
Mauritius
Mexico
Monaco
Morocco
Mongolia
Myanmar
New Zealand*
Norway
Oman
Panama
Peru
Portugal
Qatar
Romania
Russian Federation
Saudi Arabia
Senegal
Slovenia
Sri Lanka
Spain
Sudan
Sweden
Thailand
Turkey
Yugoslavia*
Ukraine
United Kingdom of Great Britain and Northern Ireland
United States of America

B. Non-governmental organizations

American Association of Retired Persons
African Gerontological Society
Heritage Foundation-Heritage Hospital
European Federation of the Elderly
Geneva International Network on Ageing
Swiss Society of Gerontology
HelpAge International
International Council for Caring Communities
International Council of Women
International Longevity Center
NGO Committee on Ageing, New York
NGO Committee on Ageing, Vienna
Verbond van Senioren
West Virginia University

C. Intergovernmental organizations

Pan American Health Organization (PAHO)
Organization of African Unity (OAU)

D. United Nations entities

Division for the Advancement of Women
Economic Commission for Africa
Economic and Social Commission for Asia and the Pacific
United Nations Centre for Human Settlements (Habitat)
International Monetary Fund (IMF)
International Research and Training Institute for the Advancement of Women (INSTRAW)

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* Reply received too late to be analysed in the present report.

Annex

Revised International Plan of Action on Ageing: extended draft framework

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I. Strategy for a society for all ages

A. Ageing in a changing world

1. We live in an ageing world. While this has been recognized for some time in developed countries, it is only recently that this phenomenon has been globally acknowledged as a defining characteristic of the twenty-first century. The increasing presence of older persons worldwide is making people of all ages more aware that we live in a multigenerational society. It is no longer possible to ignore ageing, regardless of whether one views it positively or negatively.

2. Perspectives on ageing are gradually moving away from a widespread view of older persons as patients or pensioners. Experts in the field, many of whom are older persons themselves, now use a variety of approaches to ageing, borrowing not just from demography and medical science, but psychology, economics, anthropology, ergonomics, sociology, history, art, religion and philosophy. The content and approach to ageing is becoming more reflective of the vast diversity of the world's expanding older population and must be fully explored. An ageing world presents humanity with many challenges. The imperative of the present is to turn these challenges into opportunities.

The demographic revolution[a]

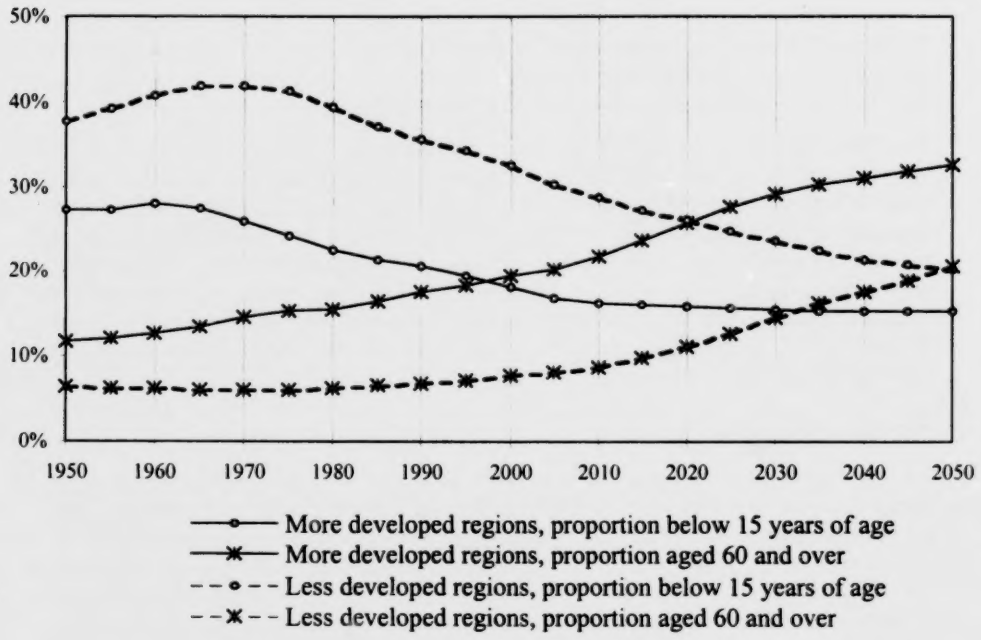
3. A "demographic agequake", a "new international population order", such terms are used to portray the dramatic growth of the world's older population. The proportion of persons aged 60 years and older throughout the world is expected to more than double, from 10 to 22 per cent, between 2000 and 2050, at which time it will be as large as the proportion of children (0-14 years). This historic demographic transition from a state of high birth and death rates to one characterized by low birth and death rates will result, for the first time in human history, in the old and the young representing an equal share in the population.

4. In developed regions, the number of older persons now exceeds the number of children and birth rates have fallen below replacement levels. In some developed countries, the number of older persons will be more than double that of children by 2050.

5. The actual "agequake", however, is about to strike developing countries, where populations are set to age rapidly in the first half of the twenty-first century. The proportion of older persons is expected to rise from 8 to 21 per cent by 2050, while that of children will drop from 33 to 20 per cent. These figures are dramatic enough. What is more compelling is the rapid pace of the ageing process and the fact that three quarters of the world's older population will live in developing countries in less than three decades. At the time of the 1982 World Assembly on Ageing, the majority of older persons lived in the developed world. In the developing world, however, despite increasing urbanization, the majority of older persons will continue to live in rural areas.

[a] The demographic data in the present report are based on recent publications of the Population Division of the Department of Economic and Social Affairs of the United Nations.

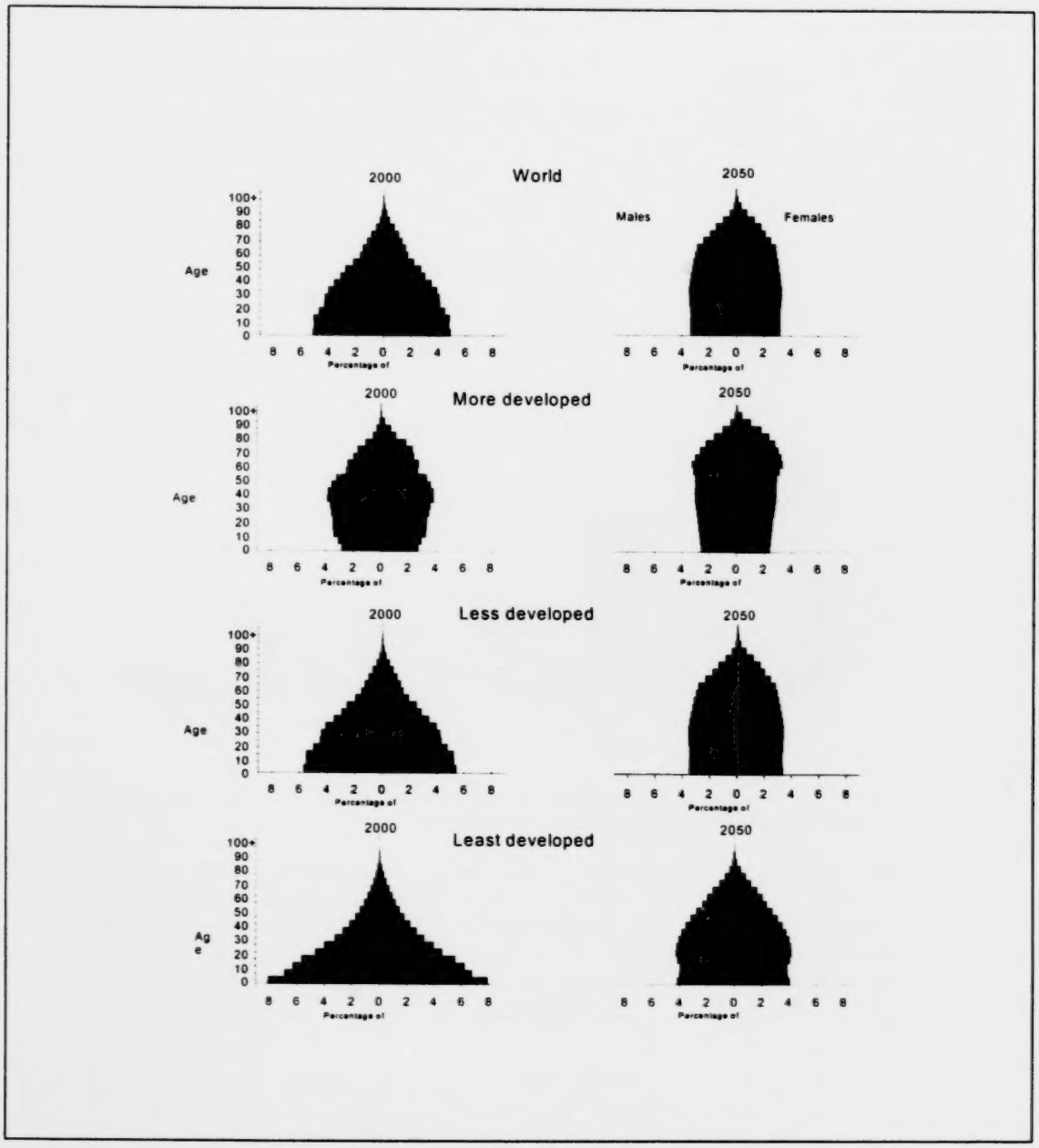
Proportion of total population aged 0-14 and 60 and over, more and less developed regions, 1950-2050



Source: *World Population Prospects*, vol. II, *Sex and Age Distribution of World Populations*, Population Division, Department of Economic and Social Affairs (United Nations publication, Sales No. E.98.XIII.5).

6. The implications of such a rapid and compressed transition from young to old is that many developing countries find themselves ageing on top of a very large population base, unlike the slower, long-term ageing of smaller populations in developed countries. While it took some countries in Western Europe a little over 100 years for their older populations to double during the twentieth century, it will take some countries in the developing world just 25 years, or even less, in the twenty-first. The impact of rapid ageing has repercussions in virtually all areas of government and society, including health care, employment and labour markets, social protection measures and economic growth. The suddenness of demographic change combined with already alarming rates of poverty and shrinking resources in developing countries underscores the pressing need for policies to take into account innovative approaches to increase the participation and social integration of older persons. New policies that respond to this unprecedented growth in the number of people living into old age will help mitigate tensions in the socio-economic fabric of the family.

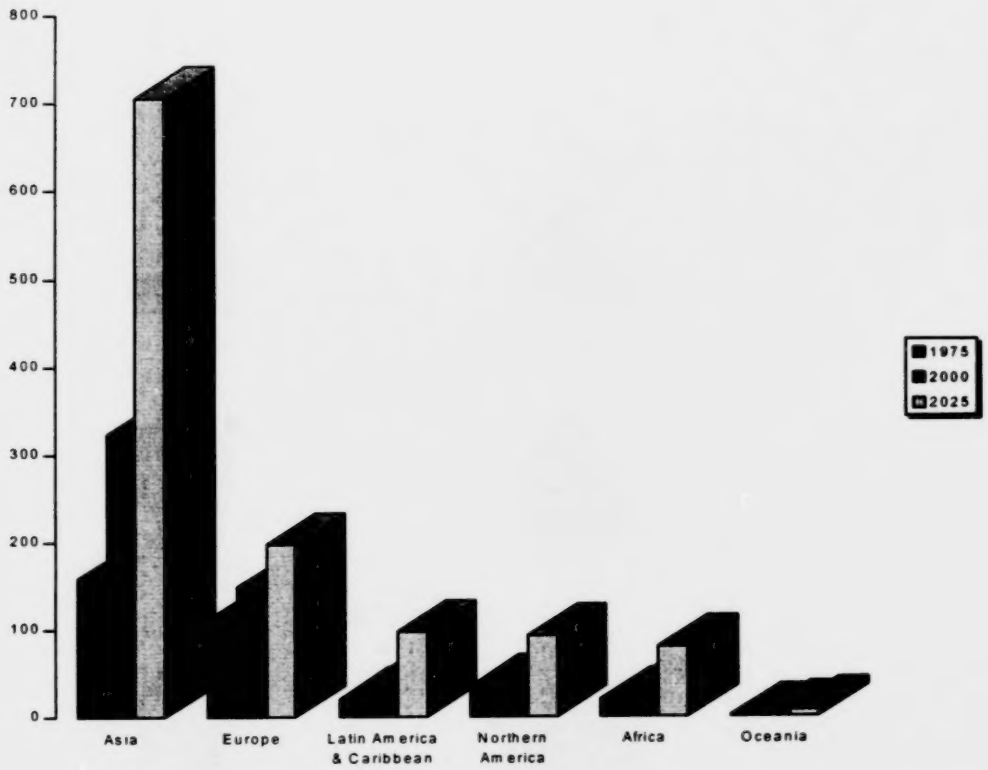
Population pyramids: age and sex distribution, 2000 and 2050



Source: *World Population Prospects*, vol. II, *Sex and Age Distribution of World Populations*, Population Division, Department of Economic and Social Affairs (United Nations publication, Sales No. E.98.XIII.5).

Regional distribution of population aged 60 or older, 1975, 2000, 2025

(In millions)



Source: *World Population Prospects*, Population Division, Department of Economic and Social Affairs (United Nations publication, Sales No. E.98.XIII.5).

7. The magnitude of changes that are likely to take place is already unfolding (see box 1). Attempts to reach the most desirable outcomes must be driven by acknowledgement that the same demographic trends that anticipate broad-scale challenges in the infrastructure of society also warrant fresh discussions and policy action on how to utilize the innumerable contributions of older citizens.

Box 1

"We are in the midst of a silent revolution that extends well beyond demographics, with major economic, social, cultural, psychological and spiritual implications". Secretary-General of the United Nations, Kofi Annan, at the launching of the International Year of Older Persons on 1 October 1998.

The longevity breakthrough

8. The twentieth century witnessed a historical lengthening of the human life span. Over the last 50 years, life expectancy at birth climbed globally by about 20 years to reach 66 years, thanks to advancements in medical knowledge and technology. Already approximately one million people cross the threshold of age 60 every month, 80 per cent of them in developing countries. The fastest growing segment of the older population is the oldest old, those 80 and older. They number 70 million, and over the next 50 years are projected to grow to five times their present number. Older women outnumber older men, increasingly so at higher ages. Today there are an estimated 81 men for every 100 women over 60; at age 80 and older this ratio decreases to 53 men for every 100 women.

9. Such a demographic boom represents remarkable changes in individual lives, going beyond the simple addition of years and into very complex and pervasive directions. While celebrated by society at large and by its individual members, increased longevity has profound implications for quality of life and healthy ageing issues, age and social integration, the situation of older women and the fostering of support and collective security over the long course of life. The issues that greet these later years clearly warrant careful attention but at the same time should not overshadow a troubling reality in parts of the developing world where old age comes earlier for large populations marked by the physical wear and tear of poverty and disease. Prolonged economic and psychosocial hardship, compounded by the HIV/AIDS pandemic, have reversed life expectancy gains in some countries, particularly in sub-Saharan Africa where men have a life expectancy of only 46 years and women 45.

B. Policy implications

10. In the 20 years since the first World Assembly on Ageing in Vienna, changes have occurred and new policy issues have been added to society's social, cultural and economic landscape. Technological progress and changing economic policies at multilateral levels have helped both to define and accelerate the features of globalization, blurring cultural and economic borders and leading to the need for greater assessment of the social impact of economic policies. Political divisions between the east and west have abated, while completely new categories of countries have emerged since the collapse of the Union of Soviet Socialist Republics, exposing countries with economies in transition as well as large numbers of people to global market conditions without adequate social protection. During the same time period, the world has witnessed the emergence of supranational bodies, such as the European Union. It is increasingly difficult, therefore, if not harmful, to group specific issues as universally applicable to entire blocks of countries, whether developing, developed or transitional. Change and transition are today among the most conspicuous characteristics in all countries and regions, in fact of the entire global community. Nonetheless, profound differences exist within as well as between countries even as global communications reach a critical mass in connecting people and cultures around the world. Economic disparities have deepened the divide between the rich and poor, especially under globalization, whose benefits for less developed nations are questionable.

11. A significant change in all countries is the dramatic reduction in the size of the nuclear family, where the number of children has fallen to 3 in developing and 1.6 in more developed countries, as compared to 6 and 2.7 only a generation ago. The consequences of such a rapid transformation are yet unforeseeable, but it is evident that in the future the number of close relatives in more families will progressively decline with each generation. This is made all the more urgent in countries where HIV/AIDS is rampant. Simultaneously, the increase in global life expectancy is producing more three-, four-, and indeed five-generation families, even as the number of individuals living alone rises. Nonetheless, intergenerational links continue to be strong although signs of change are appearing as consequences of urbanization and migration take hold.[b]

12. Trends in the occurrence and treatment of disease and in disease prevention vary throughout the world. Worldwide, mortality rates from non-communicable diseases are mounting, coinciding with the growth in the older population, while the rate for infectious diseases is on the decline. In many developing countries, societies face the double burden of fighting both infectious and non-infectious diseases, which pose formidable challenges to their health care infrastructures, especially as the family becomes a less dependable source of support.

13. Health care concerns are critical for older women, who continue to outlive men, lack resources and opportunities, suffer higher incidences of disability and carry the main responsibility for care in the family. Two recurrent trends further affect how older women are viewed and treated: policies generally address them as "vulnerable", overlooking structural inequalities; and images of older persons tend to omit them. The Beijing Declaration and the Platform for Action, adopted in 1995 and reaffirmed in 2000, recognized that women face barriers to full equality and advancement because of certain factors, including age. Participation of older women in the broader political process is inadequate, reflecting the more general trend of excluding women from meaningful participation in policy-making. Even so, there is a growing awareness of the vital contributions older women make to society, due in part to the collective efforts of older women themselves and the organizations that involve and represent them.

14. The voices of older women, as well as men, are increasingly being heard in greater numbers within the bounds of civil society, an area that has experienced startling growth in recent years. Whether for advocacy, service delivery or development activities, civil society organizations, including non-governmental organizations (NGOs), are increasingly being relied upon to implement programmes at both local and national levels. Service provision is an area of enormous importance to ageing societies where the needs for programmes are escalating, involving highly complex issues, which require cooperation and ongoing dialogue among the non-governmental and intergovernmental and the private and public sectors about the most effective, equitable and harmonious approach to designing and implementing policy. While civil society initiatives are critical to provision of programmes and services, the public role of Governments in providing basic services cannot be denied.

15. Accessibility as a general principle has gained prevalence in recent years. Global initiatives are being launched by both private and public sectors to promote

[b] E/2000/9, 2000 Report on the World Social Situation: overview.

greater responsiveness in adapting technologies, products and services, as well as architectural design and the work environment, to multigenerational communities, disabled communities and the realities of ageing populations. New initiatives in this area are vital to keep pace with forces of globalization and information technology.

16. Population trends also reveal, however, that most older people live in rural areas of developing countries, where urban design is not applicable, poverty is widespread and access to modern technology is severely limited. This demographic footnote needs to be enlarged and mainstreamed in the discourse as countries in different stages of development share research and experiences to meet the growing challenges of rural and sustainable development. Whatever the approach, the largely untapped expertise of elders in rural areas must be made more visible in the process.

Changing meanings and images of ageing

17. A positive view of ageing could be considered a prerequisite for ensuring multigenerational cohesion in society. Over the years, images of ageing, primarily in developed countries, have disproportionately portrayed older persons as a growing population group with escalating needs, including increased medical care. While health care understandably looms large in the lives of older persons, its rigid and persistent focus in the wider discourse has encouraged society to see older persons as vulnerable and frail. Furthermore, it has fostered an image of a population with whom no one, including older persons themselves, wants to identify. Public images of older persons as individuals having significant capabilities and contributions to make are not rooted in the public mind. Nascent signs of change are evident, however, as older persons themselves become more active and visible in both discourse and society.

18. How ageing is portrayed in the wider cultural landscape can affect an entire generation of youth. Those who observe elders as living respected and productive lives may be more inclined to make choices that favour postponing immediate gratification for fulfilment downstream, however, when ageing is perceived in more negative terms, younger persons, feeling that there are no rewards that come with age, may behave in ways that negatively impact their future as well as the future of their families and communities.

19. Rapid social and technological change is generating a change in values, which is affecting roles as well as trends between generations. The tradition of passing on values, knowledge and responsibility to the next generation, for example, is not as evident as it once was, with younger generations acquiring more of their values from their peers. However, even though the needs and capabilities of older persons today may not be different from those of 20 years ago, the world in which older persons live today is different, just as it will be 20 years from now, when today's adults in midlife will bear the title "older generation", and subsequent cohorts follow in step. Each generation for this reason will have a different outlook from their predecessors and face different choices, including whether to follow old scripts that may no longer be suitable.

C. International action on ageing: progress in the past 20 years

Box 2

"... policies and actions should be inspired by the determination to give further qualitative content and meaning to a quantitative process in order to make sure that the generally expanding lifespan of individuals the world over will be accompanied by efforts to fill these extra years with a sense of purpose and accomplishment, and that people will not be relegated to a marginal and passive role after a certain age level". (International Plan of Action on Ageing, para. 31 (c))

20. 1982 was a groundbreaking year for advancing the issues of ageing. It was the year of the first World Assembly on Ageing in Vienna, a historic gathering of individuals, policy makers, Governments and organizations, which focused, for the first time, on fundamental issues of population and individual ageing. The World Assembly adopted the International Plan of Action on Ageing, the first international instrument of its kind to guide global thinking on ageing. Over the next 20 years, the Plan of Action facilitated the course of policy formulation on ageing (see box 2).

21. Within a humanitarian and developmental framework, the Plan of Action enumerated 62 recommendations in seven areas of concern to older persons: health and nutrition; protection of elderly consumers; housing and environment; family; social welfare; income security and employment; and education. The initiatives and activities of the past 20 years have been largely scripted from these areas and their relevance and importance in addressing the situation of older persons has grown in step with the older population. But even though the Plan of Action was a remarkable accomplishment of broad scope, its recommendations primarily suited the needs and circumstances of the developed world, the site of the most visible signs of demographic change at that time. Two decades later, however, an extraordinary growth in the global older population and the hastening pace of demographic ageing in developing countries has brought new language and ideas to the fore. For this reason it is only in recent years that the subject of ageing has so noticeably moved towards the centre of public discourse.

22. Countless other global initiatives and debates have continued to provide the stimuli for priority action on ageing. Issues of human rights were taken up during the formulation of the 18 United Nations Principles for Older Persons, promulgated in 1991, which provide guidance in the areas of independence, participation, care, self-fulfilment and dignity, and continue to be promoted on a global scale. Further, the economic, social and cultural rights of older persons were set out in general comment No. 6 (see box 3).[c]

[c] E/C.12/1995/16 (The economic, social and cultural rights of older persons).

Box 3

"... In view of the fact that the [provisions of the International Covenant on Economic, Social and Cultural Rights] apply fully to all members of society, it is clear that older persons are entitled to enjoy the full range of rights recognized in the Covenant". The economic, social and cultural rights of older persons (E/C.12/1995/16)

23. In 1992, the General Assembly, in its resolution 47/5, adopted the Proclamation on Ageing (see box 4), in which it decided to observe the year 1999 as the International Year of Older Persons. Subsequently, in its resolution 52/80, the Assembly decided that the theme of the year would be "A society for all ages". The International Year of Older Persons advanced awareness and a critical mass of policy action worldwide, including creative efforts to mainstream ageing across all sectors and foster opportunities integral to all phases of life.

Box 4

"The General Assembly decides to observe the year 1999 as the International Year of Older Persons ... in recognition of humanity's demographic coming of age and the promise it holds for maturing attitudes and capabilities in social, economic, cultural and spiritual undertakings, not least for global peace and development in the next century". General Assembly resolution 47/5

24. Past initiatives, together with the 1995 Programme of Action of the World Summit for Social Development and other internationally agreed programmes of the previous decade,[d] guided the formulation of the conceptual framework for a society for all ages, which is made up of four dimensions: the situation of older persons; individual lifelong development; multigenerational relationships; and the interrelationship between population ageing and development. At its fifty-fourth session, the General Assembly requested that the revised plan of action and a long-term strategy be considered within the context of "a society for all ages",[e] the concept of which is rooted in the Programme of Action of the World Summit for Social Development. In the Programme of Action, the meaning of "a society for all" is viewed as the fundamental aim of social integration, where every individual, each with rights and responsibilities, has an active role to play. By adding the word

[d] See Rio Declaration on Environment and Development of the United Nations Conference on Environment and Development, 1992; Vienna Declaration and Programme of Action of the World Conference on Human Rights, 1993; Programme of Action of the International Conference on Population and Development, 1994; Declaration and Programme of Action of the World Summit for Social Development, 1995; Beijing Declaration and the Platform for Action of the Fourth World Conference on Women, 1995; and the Habitat Agenda and the Istanbul Declaration on Human Settlements of the Second United Nations Conference on Human Settlements (Habitat II), 1996.

[e] See A/54/24, para. 17; A/54/262, para. 1.

"ages" to "A society for all", the approach becomes multigenerational and holistic (see box 5).

Box 5

A society for all ages would enable the generations to invest in one another and share in the fruits of that investment, guided by the twin principles of reciprocity and equity. (A/50/114, para. 38)

25. The conceptual framework of a society for all ages,[f] has fostered reflection on how to enhance opportunities and adapt to the consequences of population ageing. It evolved out of the recognition that, while the situation of older persons remains an immediate and central policy concern of countries, a broader approach is needed in order that greater attention may be paid to long-term opportunities and problem prevention over the life course and to broad-scale adjustments of families, communities and countries. A more holistic view of ageing, as lifelong and society-wide, better reflects twenty-first century realities. There is greater recognition, for example, that learning never ceases, that it is lifelong. Policies and programmes that promote lifelong learning, as well as healthy lifestyles, workplace flexibility and skills upgrading can have positive influences, with cumulative benefits, throughout life and its transitions, beginning in the early years.

26. Initiatives to strengthen multigenerational relationships are increasingly recognized as vital to local communities as well as to the wider structure of society. Governments are particularly mindful of the reciprocal importance and value of interdependence and relationships between the generations as models of strength and continuity. Varied skills and expectations of all ages can be brought together in mutually beneficial ways, with clear benefits not only for older persons themselves, but also for families and communities, including in situations of crisis that produce conflict and displacement. At the macro level, concepts such as intergenerational equity are becoming more familiar because of the fact that numerous forces, including urbanization and globalization, are affecting traditional family structures and patterns of social and economic solidarity between generations.

27. The last dimension, the interaction between population ageing and development, is an area of great importance, although it is the least familiar in terms of policy development. Attention needs to be paid at the highest levels if the world community is to address the macroeconomic implications of population ageing in areas such as labour and capital markets, government pensions, services and traditional support systems in order to help determine future policy directions, taking into account the effects of technological and cultural change. Underpinning these discussions must also be an exploration of how the contributions of older persons can be used to advance the interests of society and to counteract the negative view of ageing as a rein on development.

28. As the ageing of the world's population becomes more pronounced over the coming decades, changes will be played out in the social and economic domains and in individual, family and community life. Ongoing debate about these matters

[f] See A/50/114.

should include an assessment of the potential of added years, balancing the needs of an ageing society with a vigorous debate about its capabilities.

D. Towards an integrated strategy

29. Today, 20 years after the first World Assembly on Ageing in Vienna, the world is recognizing the need to integrate the evolving situation of global ageing within the larger context of development. Ageing policies deserve close examination within a broader life course and society-wide perspective, taking note of recent global initiatives and the guiding principles of major United Nations conferences. Most importantly, the international community needs a reliable forward-looking scenario in which the ageing population is embraced as a potential base for future development. Recognition of the ability of older persons to contribute and show initiative for their own betterment and that of society as a whole must be woven into actions to facilitate national policies on ageing.

30. At the same time, recognition of the different challenges facing the developing and developed countries and those with economies in transition within an ageing world provides a basis for a renewed consideration of policy. In developing countries, where the number of older persons is rising rapidly, poverty continues to be the greatest threat to social and economic security, affecting the ability of older persons and their families to go beyond addressing basic needs. The effects of poverty have a great impact on any progress made to reduce the marginalization of older persons and to minimize their loss of rights. The important challenge is to provide a framework for older persons so that they can play a useful and productive role in society — and get respect and remuneration for their work. In this respect, a framework based on a rights-based approach would relate to concerns for human rights, collective well-being, equity and sustainability. Efforts must also be made to safeguard and strengthen the family and the community while building a system of income security and support for those no longer capable of independent living.

31. Equally significant to developing countries is how social security networks, which cover only a fraction of the population, can be established without duplicating the problems experienced by developed countries. In all countries, however, it is necessary to recognize the widespread social and economic changes affecting social protection schemes. Countries in all regions of the world are currently modifying or placing the development or reform of social security or pension systems on their political agendas.

32. In countries with economies in transition, older persons have borne the brunt of the impact of the revised social agenda produced by the fundamental change in the direction of those economies. Many older persons, because of the disappearance of pension benefits and social safety nets, have experienced change from a situation of complete security to one of extreme insecurity. Family support has also waned in the midst of loss of protective measures and the widening unemployment and under-employment of many younger adults.

33. In the developed countries, the ageing population has largely been shielded from poverty in old age by protective umbrella schemes: pensions; social security; and social welfare services. Issues of employment and retirement on the one hand, and isolation, as well as physical and mental incapacities on the other, are facing older persons today, while families and communities have to cope with rising costs

of medical care and various other costs associated with longer lives. The developed countries, where older persons, especially those over age 80, make up a growing share of the population, face many new challenges, including reforms of social security, public pensions and health-care institutions, in order to maintain their sustainability and modernization.

Integrating policy action

34. The knowledge, research and experiences accumulated since 1982 point unequivocally to the fact that an effective approach to addressing challenges and initiating opportunities in an ageing society requires the urgent adoption and implementation of an integrated and proactive policy at the global and national levels.

35. Mainstreaming ageing into the context of global agendas has been called for by the international community, reflecting a concerted effort for a move towards a holistic and equitable approach to policy integration. While specific issues will always vary according to country and region, population ageing is now one of the universal issues that cuts across all areas and borders with as much force to shape the future as that of globalization. The place of elders in society and to what extent it affects their well-being as well as to the well-being of society as a whole can only be optimized within an inclusive framework, where ageing ceases to be an "added on" issue and is viewed as part of the restructuring of the socio-economic and cultural landscape.

36. The shape and direction of these trends are expected to have a profound influence on society in the coming years and decades, radically affecting life in the family, community and institutions in far-reaching ways. With the world's population surpassing six billion, and ageing rapidly, and with the developing world home to 80 per cent of the global population, an immediate and sound policy response is needed.

37. Policy responses to ageing until now have tended to focus on provision of care and income security for older persons, which remain important but inadequate to the scale and rate of ageing, both present and projected in the coming decades. Society has begun to expand its approach to addressing challenges by considering policies for ageing as part of an integrated whole within the four above-mentioned dimensions of a society for all ages: the situation of older persons; individual lifelong development; multigenerational relationships; and the interrelationship of population ageing and development.

38. Reflecting the aim of a society for all ages in policy objectives can itself stimulate national initiatives. Action is needed, however, and policy planners need to press for integration of a policy for a society for all ages that incorporates, as far as is practically possible:

(a) Protection of the rights of older persons to contribute to and benefit from society;

(b) Enhanced profile of the contributions of older persons so that the image of them as a dependent population group diminish;

(c) Development of a non-discriminatory framework policy that would, inter alia, root out preconceived biases and myths surrounding old age;

(d) Opportunities throughout the life course so that the ageing population can reach maturity not only in terms of demography, but also of intellect, emotion and overall well-being;

(e) Continued growth of interaction and interdependence between the generations, in step with social and cultural change, striking a creative balance between the traditional and the new;

(f) Implementation of macro-level decisions that adapt with the changing landscape of an ageing population by ensuring support not only in family and community environments but also in the social, economic and cultural institutions we build.

39. In addition, when longevity is embraced by society as an achievement to be celebrated rather than tackled, the amassing of human resources, skills and experience at the higher ages is rightly seen as essential to the survival of any culture. This is especially needed today as policy makers grapple with the far-reaching consequences of an increasingly complex and ageing world. Failures in policy can be as sweeping in their consequences as success. Moreover, attitudes towards changes in policy are often rigid until both the reasons for change and the consequences are clearly defined. Society must not fail at this time in history to make its ageing population an integral part of its future, and an integral partner in its struggle to improve the human condition. The world of the future may have these attributes in equal measure if the wisdom and experience of its elders is utilized to help chart a course for the rest of the twenty-first century. It is a challenging prospect, but a very promising one.

II. Conceptual introduction to the priority directions

40. The International Plan of Action on Ageing is to be a main resource for policy planners and other stakeholders in the field of ageing, helping them to build a practical blueprint for policy makers in order to strengthen their capacity to adequately address issues of ageing in their respective countries. In addition, it must provide a framework in which the quality of life of older persons can be improved and sustained, especially in developing countries and countries with economies in transition where the need for such improvement is urgent. For it to be considered effective, the vision and structure of the Plan must match the attributes of its constituency. To this end, a shift in approach and policy design is required to encompass the realities of the twenty-first century.

41. A rights-based approach is suited to today's ageing society in that it underscores inclusiveness in a society for all ages and reflects, in a practical way, the United Nations Principles for Older Persons by emphasizing independence, participation, care, self-fulfilment and dignity. These rights will be maximized in societies that respect the achievements and dignity of older persons and in which age discrimination is absent. At the same time, in the spirit of a society for all ages, the rights of older persons should not infringe those of other age groups and the reciprocal relationships between the generations must be recognized. In addition, the clear recognition in policy of the important role of older persons in development would reflect the global opportunities of an ageing world.

42. In order to address new realities in policy, there are certain foundations upon which policy should be built. They include:

(a) Human rights for all ages;

(b) Lifelong participation and contribution to ensure well-being into old age;

(c) Social inclusion to ensure the integration of older persons in all aspects of life;

(d) Recognition of cultural and ethnic diversity and values to ensure that all groups have equal opportunities to participate in development;

(e) Gender equality both to respond to the cumulative disadvantage experienced by current generations of older women and to prevent its recurrence among younger generations;

(f) Multigenerational cohesion to actively foster harmonious relations between generations at both micro and macro levels.

43. The quality of life of older persons is directly influenced by the degree to which risk or security is experienced in the above areas. Achieving the desired outcome requires designing and implementing special measures that create opportunities and remove barriers. Moreover, the progression from risk or vulnerability to security is determined by policy support that has human rights as its strongest foundation. This is addressed in the three priority directions of the Plan of Action: sustaining development in an ageing world; advancing health and well-being into old age; and ensuring enabling and supportive environments for all ages. These areas are designed to guide policy formulation towards a specific goal: social, cultural and economic adjustment to an ageing world at the lifelong and society-wide level. Successful policy is only feasible if it is multilayered and connects the priority directions and the underlying foundations to the individual, community and societal level.

44. Within the first priority direction, sustaining development in an ageing world, the goal of policy is to help institutions adjust their frameworks to accommodate ageing as a growing presence and to promote it as a productive force for the good of society. Policies need to sustain development by creating environments not only for older persons to contribute to the betterment of their societies, but also for institutions to recognize and indeed encourage such opportunities, especially in an era of globalization and information technology. This is beginning to occur naturally in some countries owing to the increasing numbers of older persons and concurrent labour shortages. But the value of ageing as a resource must be recognized as having as great a potential as other age groups.

45. In the second priority direction, advancing health and well-being into old age, policy makers need to recognize the significant role that supportive interventions and opportunities play throughout the life course, beginning in youth. The health needs of individuals and communities may vary widely, but the goals are compatible. Groups, who face greater challenges, including older women and persons with disabilities, require a more strategic focus on how policies should be optimally structured to erase inequities and facilitate well-being. Further, as research continues to produce new knowledge in the area of health and longevity, Governments and civil society must find ways to transfer the knowledge base to

developing countries and strengthen their capacity for broad and sustainable networks of knowledge, skills and application.

46. In the third priority direction, ensuring enabling and supportive environments for all ages, there is a need to recognize and build on the pre-existing strengths of intergenerational solidarity at the family, community and institutional level. To this end, perceptions of ageing play a significant role in policy formulation and can influence public values relating to social, cultural and economic reciprocity. Policies and practices should be designed around the collaborative efforts of Governments and civil society to generate greater access to both the physical environment and to services and resources, including care and social protection. If policy is successful, society will benefit from the continuity and expertise of the contributions of its elders, and older persons will benefit from the right to self-fulfilment, care, independence, participation and dignity.

III. Priority directions for policy action

A. Sustaining development in an ageing world

47. The impact of a growing number of older persons is being felt throughout society and has implications for the economy, social relations and culture. However, until quite recently, social policy and programmes tended to focus on the demographic impact of youth and other population groups, with little acknowledgement of, or policy adjustments aimed at, the growing ageing population. Most developing countries still have enough lead-time to prepare for the challenges of population ageing and longevity, if they start now. Sustaining and even enhancing development in societies necessitates the integration and empowerment of older persons to both contribute to development and to benefit from it.

48. Currently, societies at all stages of development are facing a re-evaluation of the role of older persons. In developing countries and many countries with economies in transition, a major stumbling block is the continued exclusion of older persons from the development process. A growing ageing population that is marginalized economically, socially and politically and, therefore, denied opportunities for integration and participation in development, is destined to become a drain on resources.

49. The main issue in developed countries is the growing pool of retired and pre-retirement older persons who are unemployed. Some countries will soon even face labour shortages as the traditional working age population shrinks. This raises issues of productivity of an ageing society, as well as the sustainability of public pension systems and the adequacy of financial support for an extended period of retirement. In addition, there are the traditional ageist fears concerning the competitiveness and efficiency of the older worker.

50. In all countries, the principal response to challenges of sustainability of societal development is adjustment to the dynamics of a changing and ageing world on the part of both society and the individual. Societal adjustment means treating the growing number of older persons as a resource, while individual adjustment implies an upgrading of knowledge and skills throughout the life course. Special policy interventions are required in the areas of poverty alleviation, productive ageing,

employment, education, training, rural development, intergenerational solidarity and human rights and development.

Poverty alleviation

51. In many societies, particularly in developing countries and countries with economies in transition, older persons are more likely to be poor or to be at greater risk of falling into poverty. In countries where poverty is endemic, a lifetime of poverty, often exacerbated by inequalities experienced in earlier life, translates into an old age spent in poverty.

52. Older people are often excluded from poverty reduction programmes, for various reasons, inter alia, because they are not recognized as a separate group in poverty assessment research or they are not included as a potentially vulnerable group in the monitoring and assessment arrangements of ongoing or proposed macroeconomic policy development. The result is a growing population of older people.

53. As a first step in addressing this situation, Member States could consider a commitment to target older persons as a specific group within the scope of the international development goal to halve the proportion of people living in extreme poverty by 2015.

Productive ageing

54. Productive ageing, which enables older persons to continue contributing to society and supporting themselves, is the key to enhancing sustainable development and averting growing poverty levels among the older population.

55. As societies evolve and roles change, it is important for Governments to facilitate the continued participation of older persons in all sectors of society, including the social, cultural, political and economic spheres, in order to ensure their active contribution in all areas that affect their lives, including policy formulation.

56. There is growing recognition that, apart from participation in paid employment, older persons can and do benefit the community through volunteer work. The development of organizations of older persons can also enhance their participation on a collective basis.

57. Older persons are often excluded from sectoral reform programmes and development projects designed and managed by Government, NGOs and international organizations, often because of the prevailing negative stereotype concerning the ability of older persons to learn new skills. Similarly, older persons are often denied access to productive assets such as credit, technology, education and training, which would enable them to continue being contributing members in a changing society. The productive independence and economic self-sufficiency of older persons is even more urgent in societies undergoing rapid change, which strains the traditional family support network and often affects the role and situation of older persons. At the same time, in recognizing the already substantial, and often neglected, contribution older persons make to their families and communities, a new definition of "productivity" in a globalizing world is called for. It must be acknowledged that many valuable contributions are made to societies that cannot be measured in economic terms, including care for family members and household maintenance.

58. Continuing and enhancing the productivity of older persons requires access to economic and social resources. Far from being frail and inactive, the large majority of older persons, given the opportunity, contribute to society well into old age.

Employment and the ageing labour force

59. In many developed countries and countries with economies in transition, longevity has stretched far beyond established retirement age, often attended by a shrinking of the working-age population and, paradoxically, by ingrained age discrimination by employers. Meanwhile, the desire and capability of many older persons to continue working beyond retirement age is a reality.

60. At the macro level, the dilemma is how to sustain levels of national productivity while maintaining the financial security of older persons, a number of whom have been forced into early retirement with inadequate pension and savings provisions. The main issue here is to ensure that older persons can gain access to the labour market.

61. Measures that need to be taken to address this question include the education of employers about the benefits of maintaining an ageing labour force. Older workers bring experience and dependability to their work. At the same time, they have to adjust to technological and other changes in the labour market and workplace. The commitment of all parties to lifelong learning, investment in training and retraining is key to the success of older workers, and consequently, of the enterprises that employ them. It is the responsibility of both employers and employees to ensure that skills are up-to-date. Employers should also consider the introduction of flexible employment opportunities for older workers, including phased retirement, the re-hiring of retired workers for special limited-time projects and flexible hours. The position of older women in the labour force deserves special attention, including lack of career progression owing to interrupted work histories, family care obligations, greater difficulty finding employment after losing work and, hence, lower pensions. The goal for Governments is to achieve age diversity and gender balance in the workplace through introducing best principles and practices.

Literacy and education

62. The global target for education, which calls for the enrolment of all children in primary school by 2015, acknowledges that education forms the basis for a productive life. However, Member States have also recognized that lifelong learning is crucial to the participation of older persons in society.

63. One of the key problems, particularly in developing countries, is the large number of older persons who are illiterate or who have received a minimal amount of education during their childhood. This tends to be particularly problematic in rural areas. The adverse effects of illiteracy go beyond the limitations of livelihood to negatively affect the total health and well-being of older persons. For example, those who are illiterate or have little education seek health care provision less frequently. Education and training are central to worker and national productivity in the new knowledge-based economy.

64. Along with a commitment to primary education for children, Governments could consider the setting of a national goal to promote life-long education, including literacy training to all adults requesting it.

Rural development

65. In many countries, older persons reside predominantly in rural agrarian societies. In the shift to a "cash" society, the out-migration of young people to urban areas and overseas has left proportionately older communities in these rural areas.

66. Problems that have arisen in rural areas include poor infrastructure, the decline of the agricultural economy, insufficient technological knowledge, inappropriate transfer of resources to workers and lack of access to agricultural markets. A growing number of older persons are left behind without traditional family support, and some with infrequent or little support from absent kin.

67. It is urgent that resources be targeted to rural areas, first to stem the out-migration of youth, and second to sustain the independence of older persons. Priority should be given to strengthening the capacity of older farmers through access to financial and infrastructure services, improved farming techniques and technologies, revitalization of small-scale industries and enterprises, establishment of income generating projects and rural cooperatives and the provision of ongoing education, training and retraining for all adults.

Strengthening of intergenerational ties

68. Intergenerational ties and obligations are at the heart of every society, at whatever stage of development. These ties may be seen in different manifestations, from the intergenerational pact between workers and retirees, which forms the basis of many public pension systems, to the family, where still most, if not all, of the care for older persons is provided the world over.

69. Changing economic and social realities and migration, particularly in developing countries and countries with economies in transition, have often dislocated and strained those intergenerational relationships that were the bedrock of society. Rules that balance interdependence between the generations ensure the place of older persons in their communities. Economic deficits and resource allocation issues in developed countries have sometimes pitted generations against each other in an argument for an "equitable" distribution of resources. In addition, the increased amount of time spent in the workplace by both men and women has challenged the traditional notion and capacity of the family to provide the totality of care for all its members.

70. The challenge to policy makers is to preserve the life of existing intergenerational patterns of social exchange so that older persons can maintain their role in the family, the community and society at large. Policy makers must avoid transmitting misperceptions about the implications of population ageing, which lead to a negative image of intergenerational relationships. A better understanding of the contributions that older persons make to society will also serve to strengthen multigenerational ties. Governments should strive to attain age neutrality in their policies and in the distribution of resources.

Human rights and development

71. Achieving sustainable development in rapidly ageing societies depends on ensuring that older persons are not disadvantaged or discriminated against because of their age in any sphere of society and that they have equal access to the labour

market, social protection, health care, education, productive resources, legal protection and recourse under the law.

72. In all countries, arbitrary decisions are often made denying older persons access to services and resources based on their age. Rationing of health-care services, disenfranchisement of widows, denial of credit, inappropriate levels of service in care facilities and denial of employment, are just some of the issues which have been raised by a cross-section of actors, including older persons themselves.

73. Some Governments have enacted legislation on the rights of older persons or against age discrimination, but experience has proven that legislation will only be successful when it has a strong coalition of support at its base and when adequate educational and informational resources are made available to mobilize the law. In addition, a strong judicial process must ensure implementation of the law. Governments should evaluate current policies and legislation for age discriminatory practices and elaborate legal and policy measures to support a society for all ages.

B. Advancing health and well-being into old age

74. The remarkable increase in human longevity witnessed over the last few decades has its roots in improved access to primary health care and rising levels of public health measures. The astounding achievements of genetics and molecular biology promise even further gains in longevity and healthy life expectancy. However, extended longevity accompanied by good health and well-being have yet to become universal as entire countries and certain population groups are still subject to high rates of mortality and morbidity.

75. The epidemiological transition, which is now under way in all regions of the world, signifies the shift from the predominance of infectious and parasitic diseases to that of chronic and degenerative diseases. Many developing countries, however, will be facing a double burden of fighting emerging and re-emerging communicable diseases, such as HIV/AIDS and tuberculosis, along with the growing threat of non-communicable diseases.

76. The use of tobacco, alcohol and drugs, which result in poor health in later life, are still prevalent, particularly in countries with economies in transition. In some of those countries, the declining economic and social situation is reflected in the adverse health status of the population as these countries face insufficiencies in their health-care systems, which are under economic strain. In fact, in recent decades, life expectancy, particularly for men, has decreased, and in some countries with economies in transition the suicide rate for older persons is particularly high.

77. The health of the general population is vital to development, and good health is arguably an individual's most important asset and human right. Sustained well-being enables individuals to remain active and integrated into society into old age. However, to reach an old age in good health requires the efforts of Governments, civil society and the individual through a life-course approach to health and well-being. While Governments should create supportive environments for advancing health and well-being into old age, it is the responsibility of individuals to maintain a healthy lifestyle. It is therefore necessary that older persons have equal access to all preventive, curative, rehabilitative and care procedures available to other groups.

78. Through the life course, the paradigm of the individual's freedom changes since mobility and mental acuity almost inevitably diminish with age. According to World Health Organization (WHO) statistics, the incidence of disability shows a definite age gradient where only about half a per cent of young people are physically disabled, with the figures increasing to over 30 per cent for those aged 75 and over. The proportion of people having difficulties in coping with their day-to-day lives increases from about 50 per cent among those aged 60 to 64 years, to over 70 per cent among those aged 85 years and over. With an increased need for care and the need for health promotion and treatment among a growing ageing population, the costs could be overwhelming without adequate policy attention. At the current time, there is a higher prevalence of disability in old age in developing countries due to previous life experience and common health problems that are left untreated. Older women are particularly vulnerable to disability in old age owing, inter alia, to gender inequities over the life course.

79. Countries are already turning their attention to policies that promote active ageing and healthy lifestyles, realizing that lifelong health care and preventive measures can keep disability levels associated with old age at lower levels and limited to the very old population, thus providing for significant budgetary savings.

80. Special policy interventions are needed in the following areas: access to health care and elimination of inequalities; provision of primary health care; training of health providers; health promotion and development across the life course; and self-enrichment and actualization.

Access to health care and elimination of inequalities

81. Older persons can experience a number of barriers to utilizing health-care services — financial, physical and legal. For example, as some Governments have recently reduced investment in public health and welfare, a growing proportion of individuals are becoming reliant on the private sector for their health care. However, for many members of society, including older persons, private sector provision of health-care services is unaffordable. In some countries, user costs have been introduced that deter the poor from seeking health care.

82. Physical access to medical services is a particular problem for older persons in rural and remote areas. There are also inequalities built into health-care systems. Health-care providers may be reluctant to provide health services to older people, perceiving their treatment to be less vital. Charges of health care rationing based on age have been made in countries at all stages of development.

83. Governments should recognize that the provision of health care to older persons is a worthy investment, as it extends the healthy life span and thus facilitates the participation and contribution of older members of society. Existing legislation should be examined in order to remove discriminatory provisions. Partnerships with civil society, particularly non-governmental and community-based organizations, can be useful in filling the service gaps in public health provision. However, it is crucial to recognize that family and community is not a replacement for an effective public health system and that it is the responsibility of Government to set and monitor standards of health care for all ages. Legislation should ensure the right of older persons to equitable levels of health care and eliminate discrimination based on age. In addition, older persons do not regularly receive the knowledge and information they need to counteract health hazards, such as HIV/AIDS infection,

because at their age they are not considered to be at high risk. Older persons should be provided with the same information for the protection of their health and well-being as all other age groups.

Primary health care

84. In developing countries, access to primary health care and the establishment of community health programmes for older persons must be a first priority. The provision of primary health care at an affordable cost is a prerequisite for the social and economic development of a country. The use of traditional medicine and methods of health care still have a role to play in the development of new services.

85. WHO has recommended that Governments spend, at minimum, 5 per cent of their gross domestic product (GDP) on the health-care sector, and the special session of the General Assembly on the review of the outcome of the World Summit for Social Development, held in 2000, in keeping with the Declaration of Alma Ata, set a commitment by Member States to promote and attain the goal of universal and equitable access of all to primary health care, with particular efforts to rectify inequalities related to, inter alia, age. Governments should renew their commitment to reaching these goals. Emphasis must be placed on health promotion and disease prevention to decrease the incidence of disability in old age.

Training of health providers

86. In many developing countries, as well as in some countries with economies in transition, training for professionals working with older persons, including physicians, is often unavailable, resulting in a lack of awareness on the part of health professionals and para-professionals about the specific issues and problems related to older persons. In some developed countries, geriatric training for doctors remains insufficient, leading to regional imbalances in services, with rural areas, in particular, being affected. This points to a strong and urgent need for the expansion of geriatric and gerontological education among all professionals working with older persons in the health-care sector, and to the need for the institution or expansion of general education programmes on health and older persons for professionals in the social services sector.

87. In the light of the high level of informal care being provided by family members, the organization of basic training in the care of older persons for this category of caregivers is crucial to ensure the well-being of both carer and the person being cared for. Large numbers of older persons are providing care to children and family members suffering from AIDS/HIV infection. It is urgent that training be available to those providing care to people living with this infection.

Health promotion and development across the life course

88. Goals to increase the healthy life span, improve the quality of life for all, reduce mortality and morbidity rates and increase life expectancy were set by the International Conference on Population and Development, held in Cairo in 1994. These goals can only be achieved through implementation of recommendations already made by WHO to improve public health measures and access to adequate health care throughout the life cycle. Equity in access to health protection and promotion over the life course is the cornerstone of healthy ageing.

Self-enrichment and actualization

89. WHO defines health as a state of complete physical, mental and social well-being, and not merely the absence of disease and infirmity. The meaning of health and well-being requires a broader understanding of the traditional definition, and the achievement and maintenance of health, as defined by WHO, involves the optimization of opportunities for physical, social, economic and mental development throughout the life course.

90. Both physical and emotional isolation negatively affect health and well-being, particularly in old age. Establishing opportunities for older persons to participate in social, cultural and voluntary activities can help form the basis of well-being. Advocacy organizations for older persons have proven to be an important tool to facilitate their influence on public policy. In addition, opportunities for multigenerational interaction should be promoted.

C. Ensuring enabling and supportive environments for all ages

91. The promotion of an enabling environment for social development is one of the central tenets of the Programme of Action adopted at the World Social Summit, held in Copenhagen in 1995. The Programme is based on a people-centred approach to sustainable development. Similarly, to ensure a supportive and enabling environment for all ages, a socially cohesive environment, adjustment of all societal dimensions, including the financial, physical, social, spiritual and living environment. While some older persons need a high level of physical support and care, the majority are willing and capable of continuing to be active and productive. A balanced policy will enable and support their contribution to and participation in society. In developing countries, this policy includes access to basic commodities and services such as clean water and adequate food. Governments must play a central role in formulating and implementing policies to provide such an enabling environment, while engaging civil society and older persons themselves.

92. Establishing and maintaining an effective supportive and enabling environment for all ages requires effort and resources. The alternative, however, will lead to the loss of human capital and a lack of social stability. Special policy intervention is needed in the areas of: income support; housing and living environments; caregiving; protection against abuse; intergenerational relationships at the family and community level; promoting positive images of older persons; and the circumstances of older persons in emergency situations.

Income support and social protection

93. Income support and social protection measures vary from highly structured and regulated pension and income security schemes to informal community-based support measures. Social protection is now coming to be seen by many Governments as a foundation for social cohesion, rather than a residual measure to address a temporary adverse situation.

94. Recent international developments have shown that lack of attention by policy makers to comprehensive social protection policies leaves certain population groups vulnerable when market shocks or individual misfortune arise or when informal family support is strained. For many countries with economies in transition, the

economic imperatives for change have left whole segments of the population, notably older persons and children, with no institutional structure or resources for delivery of social protection services. In addition, rampant hyperinflation has rendered pensions and savings almost worthless. In some parts of sub-Saharan Africa and Asia, pension coverage is provided for less than 10 per cent of the labour force. In many countries, employment in the informal economy is growing and pension coverage is diminishing.

95. The challenge for policy makers in developed countries and some countries with economies in transition is to take measures to ensure the viability, equity and sustainability of current pension and income support systems. Governments in developing countries and countries with economies in transition, with the assistance of relevant United Nations system organizations and international bilateral organizations, are attempting to: institute or expand existing pension schemes to include a larger proportion of the population; support and maintain appropriate informal social protection schemes; devise measures to regulate private pension provision; and ensure the integrity and transparency of formal pension schemes.

Housing and living environment

96. The Istanbul Declaration on Human Settlements and the Habitat Agenda recognized the urgent necessity of improving the quality of human settlements, given how they affect the everyday lives and well-being of people. For older persons, housing and the surrounding environment is particularly important because they spend a large part of their day at home. The conditions of the environment within which they live dictates, in large part, how well older persons can be integrated in society.

97. In developing countries, accelerated demographic ageing will take place within the context of continuing rapid urbanization, with a growing number of ageing persons living in urban areas lacking the appropriate and affordable housing or services to accommodate that population. On the other hand, a large number of older persons remain in rural areas, where, due to changing familial situations, many more are living alone, instead of in the traditional environment of an extended family, often without an adequate support system. Governments need to plan such changes, bearing in mind that living arrangements and care within a traditional extended family can no longer be universally assumed.

98. In developed countries, adequate transportation for ageing populations in suburban locations is a growing concern. Housing developments in the suburbs, which have grown in recent decades, were designed for young families with their own transport. As the population in these locations ages, and older persons become more reliant on public transport, it is often found to be inadequate. The issue of older persons continuing to live in houses that they are unable to maintain when their children have moved out also requires policy attention.

99. To take into account these developments, housing policies need to be adjusted within the national context, while taking particular note of the wishes of older persons themselves with regard to their desired living arrangements. As a first priority, in cases where a housing policy specifically addressed to older persons does not exist, such a policy must be established. Minimum housing standards also need to be established, bearing in mind principles of universal design and lifelong

accommodation and accessibility. Transportation policy requires ongoing attention to ensure accessibility and safety.

Care

100. Worldwide, the main form of care is informal. Even in countries with well-developed formal care policies, intergenerational ties and reciprocity have ensured the continuation of informal care. While ageing within the community is the objective in all countries, care provision by the family without social and economic costs to caregivers can no longer be assumed. The particular costs to women, who continue to provide the overwhelming majority of informal care, are now being acknowledged. Those costs are financial in terms of low pension contribution rates due to absences from the labour market for caregiving, lost promotion opportunities and lower incomes, as well as the physical and emotional stress of trying to balance work and household obligations. This is particularly difficult for women with both child and elder care responsibilities. In many parts of Africa, an increasing number of older women are the sole caregivers for their children with AIDS, and subsequently for their grandchildren if the parents die of AIDS. At a time when older persons assume that they will be the ones being cared for by their children, they find themselves with sole responsibility for caring for frail children and even for their grandchildren.

101. In the last two decades, community care has become the policy objective of many Governments. Sometimes the underlying rationale has been financial; with community care believed to cost less than residential care. Community care is often perceived to be less expensive because it is frequently assumed that the family will supply the bulk of care. However, if family care is not available, the economic advantage of community care disappears. The problem becomes acute when adequate assistance to overburdened family caregivers is not provided. In addition, even where it exists, the formal community care system is often poorly coordinated and lacks sufficient capacity to provide for the older population. It must be recognized that the family requires intermediary support from the State if it is to continue its caregiving role. Formal support to caregivers combined with strengthening of community care systems is therefore the only available option.

102. Residential care may be the preferred option either for the frail older person or for the caregiver. Residential facilities require special attention and monitoring. For example, minimum care standards must be enforced and staff training must be provided. Measures to combat the social isolation of older persons in institutions are paramount.

103. The goal for all types of care should be adequate quantity and quality, flexible design and skilled management. The participation of older persons in assessing their own needs and monitoring service delivery is crucial to the evaluation of all the above options for care of the older population.

Protection against abuse and violence

104. Violence against older persons occurs in every country at all levels of society, and can take many forms, including physical and emotional abuse as well as the denial of human rights. Such violence originates most often from family members and caregivers. A first step in combating abuse must be general public education and training of professionals to recognize signs of abuse. Professionals need to

recognize situations that can lead to potential abuse, such as over-burdened caregivers. Services to provide assistance to both abused and abuser must also be set up.

105. The abuse of the rights of older women continues in some countries. Particularly problematic is the abuse of the rights of widows. In some countries, upon the death of the spouse, widows can be disenfranchised of their inheritance and housing, with ownership going to sons. In addition, some cultural practices can be abusive. Governments need to review legislation and customary practices for evidence of abuse and the denial of human rights.

Intergenerational solidarity in the family and community

106. Individuals age within their families and communities. The maintenance of intergenerational ties at the community and family level is crucial to all members of society and Governments should make particular efforts to strengthen those ties. In developing countries, despite the strains of modern life, the majority of older persons still have very close relations with family and community. Intergenerational exchange and support is a key part of everyday life. This support is far from being one-directional, with older persons often providing the bulk of support, both through monetary and labour contributions. However, family and community are culturally varied and changing structures. Therefore, the State, while still playing a primary role in addressing the needs of various members of society, should support the family in continuing in its role as the root of intergenerational solidarity.

107. Efforts to sustain intergenerational relationships might include fighting negative stereotypes of older persons, facilitating intergenerational contacts, preventing age segregation and promoting the relevance of the knowledge that older persons can pass on to younger persons. However, it should also be acknowledged that, for older persons, living in the family is not always the preferred or best option. In addition, the role of older persons within the family is only one of their roles within the larger community.

Promoting positive images of ageing

108. Globalization of the media and the economic and social changes taking place in each society have all affected the way older persons are viewed and portrayed. While globalization does have positive effects, its negative side includes the spread of ageism to societies in which it was traditionally unknown. When market values rise in importance, the value of older persons within the new framework is questioned by younger generations. The portrayal of older persons as using an unfair proportion of societal resources adds to their poor image.

109. Governments must take the lead in promoting positive images of older persons as contributors to society. Anti-age discrimination legislation is the most crucial measure, as are efforts to ensure the participation of older persons at all levels of society.

Older persons in emergency situations

110. In conflict, post-conflict and natural disaster situations, older persons often lose formal and informal support networks. They are frequently left behind when other family members flee conflict. In addition, older persons are ignored as a

vulnerable group, or relief agency personnel are not trained to meet their particular needs. The main issue is to ensure the same relief services to older persons as those accorded to other groups. In the aftermath of emergency situations, older persons may also need help in re-establishing their income generating capacity.

IV. Preparing to meet the challenges of ageing

111. The revised International Plan of Action on Ageing provides a general framework for the support of national and regional policy and programmes aimed at meeting the challenges of individual and population ageing. It identifies objectives and specifies actions within certain priority directions and issues. The present chapter addresses the ways and means required for reaching the objectives of the Plan and undertaking the recommended actions.

A. National action

Role of Governments, actors and partners

112. Policy action on ageing has to be undertaken primarily at the national and local levels. National Governments are the principal users towards whom the International Plan of Action is targeted and who have the primary interest and responsibility for translating its recommendations into priorities for action. In fulfilling its role, Governments should first and foremost secure national consensus and mobilize commitment at all levels to address concerns related to population and individual ageing. In operational terms, this implies mainstreaming ageing and the concerns of older persons into the national developmental agenda and socio-economic planning.

113. Another important role of Government is to coordinate national action on ageing, including statewide participation in international activities. Progress in the implementation of the Plan of Action is contingent upon broad and effective partnership between Government and civil society. Concerted and well-coordinated efforts are necessary to involve as many stakeholders as possible in civil society, including efforts by non-profit, non-governmental, community and professional organizations, business enterprises, trade unions, farmers' organizations and cooperatives, academic, research and educational institutions and the media. Governments should facilitate partnerships between all national and international actors, involving them in planning, implementation, monitoring and assessment of programmes on ageing. Older persons themselves, as well as all other intended beneficiaries, have to be engaged in the design of programmes and in their subsequent implementation.

114. Non-governmental and community-based organizations are key partners with Governments in all aspects of national action on ageing. Such organizations have clear advantages, including flexibility and efficiency in areas such as service planning and delivery, advocacy, research and resource mobilization. Transparent and accountable activities of NGOs should be seen as complementary to the central role of governmental programmes.

115. The private sector is often recognized for its innovative and cost-effective approach in the production and delivery of health and care commodities and services, as well as in education, information, training and research. In recent years,

private enterprises have introduced innovative programmes, such as flexible working hours, gradual retirement and complementary pension schemes, benefiting older employees, their families and local communities. Participation of the private sector in national, regional and international activities on ageing should be guided by: principles of respect for various cultural, religious and ethical values; accessibility and affordability to low income countries and sectors of the population; and adherence to basic human rights. It is the responsibility of Governments and intergovernmental organizations to establish a legal framework for promoting and sustaining an effective partnership with the private sector in all relevant areas of national and international actions on ageing.

National infrastructure on ageing

116. National infrastructure on ageing encompasses relevant institutions, organizations and programmes concerned with planning, implementation and evaluation of national action on ageing. Governments may wish to consider the following components in designing their national infrastructure on ageing.

117. The national plan or programme of action on ageing means the translation of the broad recommendations of the International Plan of Action on Ageing into concrete priorities for national action on ageing. It specifies mechanisms of implementation, monitoring and evaluation, identifies major partners and details coordinated activities led by the national coordinating mechanism on ageing. The national plan should also identify measures for programme management, mobilization and allocation of resources, including development of human resources.

118. The national coordinating mechanism on ageing is intended to be a multisectoral and interdisciplinary body appointed by Governments to develop, promote, monitor and evaluate the national plan or programme of action on ageing. It is usually composed of a central governmental focal point (ministry, committee, department, etc.) on ageing, as well as representatives of other governmental offices, the legislature, the non-governmental community, academia, private enterprises and older persons themselves. A national coordinating body should include mechanisms to examine and adjust existing legislation and practices for major omissions, contradictions and any discrimination with regard to older persons. Among the major tasks for national coordinated action on ageing are integration of issues of ageing into national development plans and the elaboration and implementation of a national plan or programme of action on ageing.

119. Additional important elements of national infrastructure on ageing would include effective organizations of and for older persons; educational, training and research activities on ageing; and national data collection and analysis entities, collecting gender and age-specific information for policy planning, monitoring and evaluation. Governments should also establish and/or facilitate mechanisms of independent, detached, impartial and objective monitoring of progress in implementation of national plans and programmes on ageing.

B. Research agenda on ageing

120. Policy interventions on ageing should be based on a solid scientific background. In preparation for and follow up to the International Year of Older

Persons (1999), the United Nations Secretariat, assisted by the non-governmental and research community, as well as interested Member States, has been developing a worldwide research agenda on ageing for the twenty-first century to serve as a background for policy response to population and individual ageing, particularly in developing countries. The research agenda aims to increase understanding of the new policy-related aspects of ageing in order to improve the quality of later life, reduce inequalities and ensure the sustainability of societal and human development based on the recognition of the diversity in societies at different levels of demographic, as well as social and economic development. The research agenda is intended to assist policy makers and others in their attempts to define policy goals; select priorities for policy interventions; identify measures for policy implementation; evaluate the impact of age-specific and other policy measures; and support capacity-building.

121. The Research Agenda has identified key priority areas for research exploration vis-à-vis policy intervention, such as quality of life, processes of ageing and "healthy ageing"; productivity and integration of older persons; material security over the full life course; and support networks and comprehensive coordinated systems of care and support. It has also selected substantive research priorities, including:

(a) Relationship between fundamental molecular and cellular processes of ageing vis-à-vis well-being and the emergence of morbidity and functional decline;

(b) Well-being and social and financial support systems (comparative studies);

(c) Means of empowering older populations to recognize their own capacities and contributions;

(d) Situation of older persons in developing countries;

(e) Transitions as they occur in the life course;

(f) Built environment needs of an ageing population;

(g) Ageism: its determinants and dynamics;

(h) Social security and health care: models of funding;

(i) Healthy ageing: definition, dimensions, cross-cultural and cross-national tools for measurement.

122. Currently, the research agenda project is focusing on refining the specific research priorities and identification of key national and international partners for its implementation. Preparation of the research agenda on ageing has entered its final stage and, when completed, it will be included as an annex to the final draft of the revised International Plan of Action on Ageing, which will be submitted to the Preparatory Committee for the Second World Assembly on Ageing in 2002.

123. Member States will be invited to consult the research agenda when selecting their national priorities for policy related research on ageing. End-users of the research agenda would include legislative bodies, Governments, academia, as well as NGOs and aid agencies dealing with developmental issues, including population and individual ageing.

C. Training and education

124. Training and education are powerful tools for development. Several interconnected dimensions of education and training vis-à-vis ageing should be emphasized and promoted: adult education and training; older persons as educators and trainers; professional training in the field of ageing; and education of the general public about ageing.

125. Adult education and training includes, but is not limited to, literacy education and continuing education of older persons. The overall task is to assist older persons in their adjustment to the rapidly changing circumstances and to provide them with necessary knowledge and skills to eliminate their disadvantage and marginalization, including in the labour market. It is a universal task, requiring cooperative action by Governments and civil society.

126. Older persons themselves are an invaluable resource in conducting education and training programmes, in particular at the community level. They should be supported in assuming key roles as voluntary or paid educators and trainers in literacy programmes, public awareness campaigns and education campaigns on cultural traditions as well as in programmes on heritage, the environment, substance abuse, AIDS/HIV prevention and other areas.

127. Professional training in the field of ageing is a fundamental prerequisite for progress in implementation of national policy and programmes on ageing. Programmes for health and care professionals, including upgrading the management skills of service delivery personnel and family training in caregiving, should be made universally available. Innovative methods of training and education, such as distance learning, should be promoted to fill the gap in skilled personnel, particularly in remote and rural areas. International cooperation in this area is of particular importance and additional efforts are required by the United Nations system and international development community to promote the establishment of global and regional training centres, such as the International Institute on Ageing in Malta and the regional training centre operated by HelpAge International in Thailand.

128. The 1982 International Plan of Action on Ageing stressed the need to educate the general public about the process of ageing, emphasizing that such an education should start at an early age so that ageing is fully understood as a natural process. This task remains timely and important for successful implementation of the revised International Plan, as it promotes the understanding of ageing as a meaningful stage in life. Among the proposed measures are information campaigns, exhibitions, and literature to promote positive images of ageing and role models of older persons, particularly older women. It is even more important to make positive and realistic information about the ageing process universally available by incorporating it into the primary and secondary school curricula, as well as into multidisciplinary post-secondary studies.

D. International cooperation

129. This section outlines the general framework and specific recommendations for international cooperation in the implementation of the Plan. It should be emphasized that the implementation of the International Plan of Action on Ageing should be

viewed as an integral component of action of the international community aimed at achieving the goals of social integration and development.

130. This section sets out priorities for international cooperation on ageing, which have been identified through international inquiries conducted by the United Nations programme on ageing in 2000 during preparations for the Second World Assembly on Ageing. These priorities include, in order of importance:

(a) Formulation, monitoring and evaluation of policies and programmes;

(b) Research to support policy and programme development;

(c) Training of health and social service professionals;

(d) Establishment of income generating projects;

(e) Data collection and processing;

(f) Scientific research;

(g) Education;

(h) Information dissemination and the sharing of best practices;

(i) Funding to improve existing programmes.

131. This section will also include recommendations for action by the United Nations and other international institutions and organizations.

132. It is proposed that the programme on ageing of the United Nations Department of Economic and Social Affairs should remain the United Nations global focal point on ageing, including the implementation of the revised International Plan of Action on Ageing. The functions of the Programme should include:

(a) Monitoring and evaluation of the implementation of the Plan at the global level, including through maintaining and updating the Internet accessible database of policies and programmes on ageing;

(b) Promotion of the implementation of the Plan at the regional and national levels through elaboration of substantive guidelines, such as the United Nations research agenda on ageing and the direction of global information campaigns;

(c) Coordination of the activities of the organizations of the United Nations system on ageing aimed at implementing the Plan;

(d) Strengthening the international collaborative network on ageing, which includes Governments, non-governmental and professional organizations, academia and the private sector.

133. It is emphasized that the first and most crucial stage in the implementation of the Plan will be the translation of its broad and universal recommendations into concrete objectives for national action. Regional action led by the United Nations regional commissions should provide essential support to the national processes of implementation of the Plan.

E. Monitoring, review and updating

134. Monitoring, review and updating should be undertaken primarily at the national level and incorporated, as feasible, into regional process of the implementation of the Plan.

135. It is also recommended that a process of global monitoring and review take place. The process would consist of two components: first, an ongoing review of national policies and programmes on ageing, to be undertaken through the Internet accessible database of policies and programmes on ageing maintained by the United Nations programme on ageing; and, second, through a focused global inquiry and analysis to be conducted every five years within the priority themes identified by the Commission for Social Development.

136. The Commission for Social Development should be designated the intergovernmental body to review the implementation of the Plan of Action every five years and to make proposals for its updating as considered necessary. The findings of the deliberations of the Commission should be transmitted through the Economic and Social Council to the General Assembly for consideration. The Department of Economic and Social Affairs should coordinate the process of monitoring and review of the Plan.